Case 15-42300 Doc 1	Filed 12/15/15	Entered 12/15/15 20:56:25	Desc Main
Fill in this information to identify your case:		age 1 of 72	
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under:		
	Chapter 7 Chapter 11 Chapter 12		Check if this is an
	Chapter 13		amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pá	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Shukura	
		First name	First name
	Write the name that is on		
	your government-issued picture identification (for	Middle name	Middle name
	example, your driver's	Tartt	
	license or passport	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you	Shukura	
	have used in the last	First name	First name
	8 years		
	Include your married or	Middle name	Middle name
	maiden names.	Love	
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social	XXX - XX	xxx - xx-
	Security number or	OR	OR
	federal Individual	9 xx - xx-	9 xx - xx-
	Taxpayer Identification		
	number (ITIN)		

Debtor 1 Shukur Case 15-4	42300 Doc 1	Filed 12/1/5/15		1:2/15/15 /20	⊮56: <u>25 Desc</u>	<u>Main</u>
riistramo	Wildale Harris	Document	Page 2 of			
	About Debtor 1:			About Debto	or 2 (Spouse Only	in a Joint Case):
4. Any business names and Employer	✓ I have not used any	business names or EIN:	S.	I have not	used any business name	es or EINs.
Identification Numbers (EIN) you have used in the last	Business name			Business nar	ne	
8 years	Business name			Business nar	me	
Include trade names and doing business as names						
5. Where you live				If Debtor 2 liv	es at a different addre	ess:
		S 53rd Ave, Apt # 2				
	Number Stree	et .		Number	Street	
	Cicero	Illinois 60	0804			
	City	State Zi	p Code	City	State	Zip Code
	Cook					
	County			County		
	If your mailing address it in here. Note that the comailing address.				ailing address is differ the court will send any n	rent from yours, fill it in otices to this mailing
	Number Stree	et		Number	Street	
	City	State Zi	p Code	City	State	Zip Code
6. Why you are choosing this	Check one:			Check one:		
district to file for bankruptcy		ays before filing this petiter than in any other distr			ast 180 days before filing rict longer than in any o	this petition, I have lived ther district.
	I have another reason	on. Explain. (See 28 U.S	S.C. §§ 1408.)	I have ano	ther reason. Explain. (Se	ee 28 U.S.C. §§ 1408.)
				-		
						_

ShukuraCase 15-42300 Filed 12/1/5/15 Entered 1:2/41-5/11-5 (2:20:56:25 Desc Main Doc 1 Debtor 1 Page 3 of 72 Document Document Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 fileunder Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for □ No. bankruptcy within the last 8 years? Yes. District Northern District of Illinois When 4/27/2015 Case number 15-14757 MM / DD / YYYY District Northern District of Illinois When 9/8/2014 Case number 14-32697 MM / DD / YYYY District Northern District of Illinois When 3/25/2014 14-10816 Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or Yes. District being filed by a Relationship to you spouse who is not When Case number, if known filing this case with you, or by a District Relationship to you business partner, or When Case number, if known by an affiliate? MM / DD / YYYY 11. Do you rent your ✓ No. Go to line 12. residence?

Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with

No. Go to line 12.

this bankruptcy petition.

Page 4 of 72 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor Part 3: 12. Are you a sole \square No. Go to Part 4. proprietor of any full- or part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. City Zip Code If you have more than State one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? ◪ No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? City State Zip Code

Entered 12/45/15 20:56:25 Desc Main

ShukuraCase 15-42300

Doc 1

Filed 12/1/5/15

Debtor 1 Shukur Case 15-42300 Doc 1 Filed 12/1/5/15 Entered 12/1/5/16 (20) 56:25 Desc Main

First Name Middle Name Docume Page 5 of 72

Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5: **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this about credit bankruptcy petition, and I received a certificate of bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of bankruptcy petition, but I do not have a certificate of file for bankruptcy. completion. completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment following choices. If plan, if any. plan, if any, you cannot do so, you are not eligible to I certify that I asked for credit counseling services from I certify that I asked for credit counseling services from file. an approved agency, but was unable to obtain those an approved agency, but was unable to obtain those services during the 7 days after I made my request, and services during the 7 days after I made my request, and If you file anyway, exigent circumstances merit a 30-day temporary waiver exigent circumstances merit a 30-day temporary waiver the court can dismiss of the requirement. of the requirement. your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before you obtain the briefing, why you were unable to obtain it before you your creditors can filed for bankruptcy, and what exigent circumstances required filed for bankruptcy, and what exigent circumstances required you to file this case. you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your payment plan you developed, if any. If you do not do so, your case may be dismissed. case may be dismissed. Any extension of the 30-day deadline is granted only for cause Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried to internet, even after I reasonably tried to do so. Active duty. Active duty. I am currently on active military duty in a I am currently on active military duty in a military combat zone. military combat zone. If you believe you are not required to receive a briefing about If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit credit counseling, you must file a motion for waiver of credit

counseling with the court.

counseling with the court.

ShukuraCase 15-42300 Filed 12/1/5/15 Entered 1:2/41-5/11-5 (2:20:56:25 Desc Main Doc 1 Debtor 1 Page 6 of 72 Document of the Document of th Answer These Questions for Reporting Purposes Part 6: 16.a Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16.b Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Do you estimate that paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ✓ No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **✓** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Shukura Tartt Signature of Debtor 2 Signature of Debtor 1 Executed on 12/16/2015 Executed on MM / DD / YYYY MM / DD / YYYY

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Marcie Venturini 6203500			Date	12/16/2015
Signature of Attorney for Debtor			Date	MM / DD / YYYY
Marcie Venturini 6203500				
Printed name				
Semrad Law Firm				
Firm name				
Number	Street			
City		State		Zip Code
Contact phone				Email address
Bar number				State

<u>Case 15-42300 Doc 1 Filed 12/15/15 Entered 12/1</u>5/15 20:56:25 Desc Main Fill in this information to identify your case: Debtor 1 Shukura First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$17,305.00 1b. Copy line 62, Total personal property, from Schedule A/B \$17,305.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$23,000.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$73.010.98 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F...... \$96,010.98 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$3,259,32 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$3,247.00

Shukur&Case 15-42300 Filed 12/1/5/15 Entered 1:241-5/11-5 /20:56:25 Desc Main Doc 1 Debtor 1 Page 9 of 72 Answer These Questions for Administrative and Statistical Records Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$3,602.67 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as

\$0.00

\$0.00

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

Fill in this	information to identify your case		FIIEO 12	/ 5/ 5 F	-ntered 12/15/	15 20:56:25 Des	с Main	
Debtor 1	Shukura			Tartt				
	First Name	Middle	Name	Last Nam	ie			
Debtor 2 (Spouse,	if filing) First Name	Middle	Name	Last Nam	ne e			
United St	ates Bankruptcy Court for the:	Northern		District of Illino				
Case nun				(Stat				
Officia	al Form 106A/B						Check if this is an	
	dule A/B: Prope	rtv					amended filing	
n each ca category v esponsib vrite your	ategory, separately list and des where you think it fits best. Be ble for supplying correct infor r name and case number (if kn Describe Each Residen	scribe items. List e as complete and mation. If more s lown). Answer eve	d accurate as pace is need ery question	s possible. If tw ded, attach a so	vo married people are eparate sheet to this	filing together, both are eq form. On the top of any add	in the ually	
	u own or have any legal or eq							
✓	No. Go to Part 2 Yes. Where is the property?		What is the	ne property? C	theck all that apply.	Do not deduct secured o	claims or exemptions. Put	
1.1	Street address, if available, or	other description	Single	family home or multi-unit bu		the amount of any secured claims on Schedule E Creditors Who Have Claims Secured by Proper		
			Condominium or cooperative Manufactured or mobile home		Current value of the entire property?	Current value of the portion you own?		
	Number Street		Land					
	City State	Zip Code	Investment propertiesTimeshareOther			Describe the nature of interest (such as fee s the entireties, or a life	imple, tenancy by	
	o.i.y o.i.i.	p	Ш		the property? Check o			
				1 only		(see instructions)	mmunity property	
				2 only				
				1 and Debtor 2	only tors and another			
			Other info	rmation you w	rish to add about this	item, such as local		
If you	own or have more than one, list h	nere:	property i	dentification n	number:			
1.2				ne property? C	check all that apply.		claims or exemptions. Put ed claims on <i>Schedule D:</i>	
	Street address, if available, or	other description		c or multi-unit bu	uilding	Creditors Who Have Cla	aims Secured by Property.	
				minium or coope		Current value of the entire property?	Current value of the portion you own?	
				actured or mobil	e home			
	Number Street		Land Investr	nent property		Describe the nature of	f your ownership	
	City State	Zip Code	Times	nare		interest (such as fee s the entireties, or a life		
				an interest in t	he property? Check o	ne. Check if this is co	mmunity property	
				2 only				
				1 and Debtor 2	-			
			_		tors and another			
				rmation you w dentification n	vish to add about this number:	item, such as local		

Debtor 1	ShukuraCase 15-423	00 Doc 1 I	Filed 12/1/5/15 Entered 12/1/5/1/5	@0.56: <u>25 Des</u>	c Main	
1.3 Street address, if available, or other description		w	Docume: Name Page 11 of 72 hat is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?		
Num City	street State	Zip Code	Investment property Timeshare Other	Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by	
		w C C	ho has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is con (see instructions)	nmunity property	
you have Part 2: In the Part 2: In t	Describe Your Vehicle m, lease, or have legal or eat someone else drives. If you	s quitable interest in a lease a vehicle, also r	operty identification number: of your entries from Part 1, including any entries for the second sec	clude any vehicles		
3. Cars, va No Yes	ns, trucks, tractors, sport utilit	y vehicles, motorcycle	s			
	Make Model: Year: Approximate mileage: Other information: // REAFFIRM	Nissan Altima 2012 60000	Who has an interest in the property? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured of the amount of any secure Creditors Who Have Clater Current value of the entire property? \$10525.00	•	
			Check if this is community property (see instructions)			
3.2	Make Model: Year: Approximate mileage:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only		d claims on Schedule D: ims Secured by Property.	
	Other information:		Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Current value of the entire property?	Current value of the portion you own?	

Debtor 1	ShukuraCase 15-42300 First Name	Doc 1 Filed 12/4-5/15 Entered 12/4-5/15	@0.56: <u>25 Des</u>	c Main	
3.3	Make Model: Year:	Middle Name Documative Page 12 of 72 Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property		
	Approximate mileage: Other information:	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?	
		Check if this is community property (see instructions)			
3.4	Make Model: Year:	Who has an interest in the property? Check one. Debtor 1 only	•	aims or exemptions. Put and claims on Schedule D: nims Secured by Property.	
	Approximate mileage:		Creations who have on	iiinis occured by 1 roporty.	
		Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see instructions)			
4.1	Yes Make Model: Year:	Who has an interest in the property? Check one. Debtor 1 only	the amount of any secure	aims or exemptions. Put ed claims on Schedule D:	
	Approximate mileage:		orcanors who have on	iiins occured by Froperty.	
	Other information:	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
		At least one of the debtors and another Check if this is community property (see instructions)			
4.2	Make Model: Year: Approximate mileage:	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property		
	Other information:	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
		At least one of the debtors and another Check if this is community property (see instructions)			
		ou own for all of your entries from Part 2, including any entries fo		0525.00	

Filed 12/1/15 Entered 12/1/15/120:56:25 Desc Main Shukur&Case 15-42300 Doc 1 Debtor 1

Page 13 of 72 Describe Your Personal and Household Items Part 3: Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware No ✓ Yes. Describe... Furniture \$400.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games **√** No Yes. Describe... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **✓** No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment **✓** No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ✓ Yes. Describe... Clothing \$350.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list

\$750.00

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached

for Part 3. Write that number here

✓ No

Yes. Describe...

Debtor 1 ShukuraCase 15-42300 Doc 1 Filed 12/16/15 Entered 12/16/16 (20) 56:25 Desc Main

First Name Middle Name Documet Name Page 14 of 72

Describe Your Financial Assets

Part 4:

Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Institution name: Yes \$30.00 17.1. Checking account: Chase Bank Checking Account #1 17.2. Checking account: Chase Bank Checking Account #2 \$0.00 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

	tor 1 ShukuraCase 15		Filed 12/1/5/15 Entered 12/1/5/15/120:56:25	Desc Main
20.	Negotiable instruments i	nclude personal checks, ca	Documer Page 15 of 72 regotiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	Yes. Give specific information about them	Issuer name:		
21.	Retirement or pension Examples: Interests in IF		403(b), thrift savings accounts, or other pension or profit-sharing plans	
	∐ No	Type of account:	Institution name:	
	Yes. List each account separately.	401(k) or similar plan:	401K Retirement Account	\$1500.00
		Pension plan:		
		IRA:		
		Retirement account:		
		Keogh:		
		Additional account:		
		Additional account:		
22.		deposits you have made so	that you may continue service or use from a company , public utilities (electric, gas, water), telecommunications	
	✓ Yes		Institution name:	\$1000.00
		Electric:	Security Deposit with landlord	<u> </u>
		Gas:		
		Heating oil:		
		Security deposit on rental	l unit:	
		Prepaid rent:		
		Telephone:		
		Water:		
		Rented furniture:		
		Other:		
23.	Annuities (A contract fo	r a periodic payment of mor	ney to you, either for life or for a number of years)	<u> </u>
	Yes	Issuer name and descript	tion:	

Dept	tor 1 ShukuraCase 15-4230			<u>iesc Main</u>
24.	Interests in an education IRA, 26 U.S.C. §§ 530(b)(1), 529A(b),	Middle Name Docum as in Age nan account in a qualified ABLE program, or und seed to 10.00 (1).	16 of 72 der a qualified state tuition program.	
	No Institution name at Yes	d description. Separately file the records of any interes	sts.11 U.S.C. § 521(c):	
25.	Trusts, equitable or future inte	ests in property (other than anything listed in lin	e 1), and rights or powers	
	exercisable for your benefit			
	✓ No Yes. Describe			1
26.		s, trade secrets, and other intellectual property websites, proceeds from royalties and licensing agree	ements	
	✓ No			
	Yes. Describe			
27.	Licenses, franchises, and othe Examples: Building permits, exclu	general intangibles ive licenses, cooperative association holdings, liquor	licenses, professional licenses	1
	√ No	, , , , , , , , , , , , , , , , , , ,	, i	
	Yes. Describe			
Moı	ney or property owed to y	u?		Current value of the
				portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			·
	No	2015 Fire acted Tay Defined	Federal:	\$3500.00
	Yes. Give specific information about them, including wh		State:	
	you already filed the retu and the tax years	ns	Local:	
29.	Family support Examples: Past due or lump sum a	mony, spousal support, child support, maintenance, div	vorce settlement, property settlement	
	✓ No			
	Yes. Give specific information		Alimony:	
			Maintenance:	
			Support:	
			Divorce settlement:	
30.	Other amounts someone owes	ou	Property settlement:	
		insurance payments, disability benefits, sick pay, vaca unpaid loans you made to someone else	tion pay, workers' compensation,	
	No			
	Yes. Describe			1

Deb	tor 1 ShukuraCaSe 15-42300 DOC 1 First Name Middle Name	Filed 12/14/5/15	Entered Casellow	止め (迷し) あり: <u>25 D</u>	<u>esc main</u>
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health		Page 17 of 72 dit, homeowner's, or rente	er's insurance	
	No ✓ Yes. Name the insurance company of each policy and list its value	Company name: Term life insurance policy		Beneficiary:	Surrender or refund value: \$0.00
32.	Any interest in property that is due you from so If you are the beneficiary of a living trust, expect proproperty because someone has died. No Yes. Describe		olicy, or are currently entitle	ed to receive	
33.	Claims against third parties, whether or not you Examples: Accidents, employment disputes, insurative No		de a demand for payme	nt	
3/1	Yes. Describe	wery nature including cou	ntaralaims of the debtoo	r and rights	
34.	to set off claims	very nature, including cou	nterciains of the debtor	r and rights	
	✓ No Yes. Describe				
35.	Any financial assets you did not already list				
	✓ No Yes. Describe				
36.	Add the dollar value of all of your entries from for Part 4. Write that number here				\$6030.00
Part	5: Describe Any Business-Related Pro	operty You Own or Ha	ve an Interest In. Li	st any real estate ir	n Part 1.
37.	Do you own or have any legal or equitable inter	est in any business-related	property?		
	No. Go to Part 6. Yes. Go to line 38.				Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable or commissions you alread	dy earned			
	✓ No Yes. Describe				
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, n	nodems, printers, copiers, fax	machines, rugs, telephone	es, desks, chairs, electroni	c devices
	✓ No Yes. Describe				

	Shukura ase 1:	5-42300 DOC _		\overline{E} \overline{C} \overline{C} \overline{S} \overline{e} \overline{L} \overline{D} \overline{L} \overline{D}	esc Main
40.	Machinery, fixtures, eq	uipment, supplies you	Documethine Page 1 use in business, and tools of your trad	8 of 72	
	✓ No				
	Yes. Describe				
41.	Inventory				
	√ No				
	Yes. Describe				
12	Interests in partnershi	ine or joint vontures			
42.	No No	ps or joint ventures			
	Yes. Give specific		Name of entity:	% of ownership:	
	information about				_
	them				
					_
43. (Customer lists, mailing	lists, or other compilat	ions		
	✓ No				
	Yes. Do your lists inc	clude personally identifiab	ole information (as defined in 11 U.S.C. § 1	101(41A))?	
	☐ No				
	Yes. Descr	ibe			
44.	Any business-related p	property you did not alre	eady list		
	✓ No				
	Yes. Give specific				
	information				
					
45 A	dd the dollar value of al	II of your entries from F	Part 5, including any entries for pages y	vou have attached	
	art 5. Write that number	-			
Part			cial Fishing-Related Property Y	ou Own or Have an Interest In	
40	•	n interest in farmland, list it		ar valeted wyswarts 2	
46.		ny legal or equitable int	terest in any farm- or commercial fishir	ng-related property?	Current value of the
	✓ No. Go to Part 7. Yes. Go to line 47.				portion you own? Do not deduct secured
	100. 00 10 1110 17.				claims
47	Form onimals				or exemptions
47.	Farm animals Examples: Livestock, pou	ultry, farm-raised fish			
	✓ No				
	Yes. Describe				

Deb		2/1/5/15 mathtme	Entered 1:24 Page 19 of 7	45/145/20:56: <u>25</u> 2	Desc	<u>Main</u>
48.	Crops-either growing or harvested		. ago 10 01 1	_		
	No					
	Yes. Describe				_	
49.	Farm and fishing equipment, implements, machinery, fixture	s, and tools	of trade			
	✓ No					
	Yes. Describe					
50.	Farm and fishing supplies, chemicals, and feed					
	V No					
	Yes. Describe					
E4	Any forms and commercial finking related accomment your did us	at alvaadu li				
51.	Any farm- and commercial fishing-related property you did no Examples: Livestock, poultry, farm-raised fish	ot aiready ii	St			
	✓ No					
	Yes. Describe					
	dd the dollar value of all of your entries from Part 6, including art 6. Write that number here	•		attached	-	
	art of write that half believe the second					
	<u></u>					
Part	7: Describe All Property You Own or Have an Inte	erest in TI	nat You Did Not	List Above		
53.	Do you have other property of any kind you did not already lie Examples: Season tickets, country club membership	st?				
	☑ No					
	Yes. Give specific					
	information					
E4 A	dd tha dallar valua of all of vaur antriae from Bort 7. Write that	number be		1		
54. A	dd the dollar value of all of your entries from Part 7. Write that	number ne	e			
Part	8: List the Totals of Each Part of this Form					
<i>EE</i> F	Part 1: Total real estate, line 2					
55. r	rart 1: Total real estate, line 2			P		
56. p	part 2 total vehicles, line 5	\$10525.0	00			
57. P	art 3: Total personal and household items, line 15	\$750.00				
58. P	art 4: Total financial assets, line 36	\$6030.00)			
59. F	Part 5: Total business-related property, line 45					
60. F	Part 6: Total farm- and fishing-related property, line 52					
61. F	Part 7: Total other property not listed, line 54					
62. 1	Total personal property. Add lines 56 through 61	\$17305.0	<u> </u>			
		ψ17303.0		Copy personal property to	tal ►	
						\$17305.00
63. T	otal of all property on Schedule A/B. Add line 55 + line 62					

Fill i	n this informa	Case 15-42300 ation to identify your case:	Doc 1 File	ed 12/15/15	Entered 12/	5/15 20:56:25	Desc Main
	otor 1	Shukura First Name	Middle Name	Tartt	Name		
	otor 2 ouse, if filing)		Middle Name		Name		
Unit	ed States Ba	nkruptcy Court for the:	Northern	District of I	Illinois (State)		
	e number nown)						
Of	ficial F	orm 106C				-	Check if this is a amended filing
Sc	hedule	C: The Prop	erty You C	laim as E	xempt		12/1
s to exer exer exer orop	o state a s mpted up eive certain mption of perty is do the Identi Which set	pecific dollar amour to the amount of an in benefits, and tax-	at as exempt. Alt y applicable states exempt retirement value under a lathat amount, you Claim as Exempt aiming? Check one of nonbankruptcy exempt	ernatively, you tutory limit. S ent funds—ma aw that limits to our exemption t only, even if your sp otions. 11 U.S.C. § §	u may claim the fome exemptions y be unlimited in the exemption to would be limited	ull fair market value —such as those for dollar amount. How a particular dollar to the applicable s	claim. One way of doing so e of the property being r health aids, rights to wever, if you claim an amount and the value of the statutory amount.
2.	For any pro	operty you list on Schedu	lle A/B that you clair	n as exempt, fill i	n the information belo	ow.	
		ription of the property an le A/B that lists this prop		you Check o	t of the exemption yo	•	cific laws that allow exemption
	Brief description:	Furniture	\$400.00	\[\sqrt{1}			735 ILCS 5/12-1001(b)
	Line from Schedule A			100	\$400.00 9% of fair market value, blicable statutory limit		
	Brief description:	Chase Bank Checkin	ng \$30.00		\$30.00		735 ILCS 5/12-1001(b)
	Line from Schedule A	/B:17			% of fair market value,	up to any	
3.	(Subject to a	niming a homestead exently adjustment on 4/01/16 and of the distribution of the distri	every 3 years after tha	t for cases filed on o	•	,	

☐ No

Debtor 1 Shukur Case 15-42300 Doc 1 Filed 12/14/5/15 Entered 12/14/5/15 (20:56:25 Desc Main

First Name Document Plane Page 21 of 72

Additional Page Part 2: Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief **Chase Bank Checking** \$0.00 Account #2 description: Line from 100% of fair market value, up to any 17 Schedule A/B: applicable statutory limit Brief 735 ILCS 5/12-1001(a), (e) \$350.00 Clothing $\overline{}$ description: \$350.00 Line from 100% of fair market value, up to any Schedule A/B: 11 applicable statutory limit 735 ILCS 5/12-1001(c) Brief \$10,525.00 description: // REAFFIRM Line from 100% of fair market value, up to any Schedule A/B: 03 applicable statutory limit 735 ILCS 5/12-1001(b) Brief Security Deposit with \$1,000.00 \checkmark landlord description: \$1,000.00 Line from 100% of fair market value, up to any Schedule A/B: 22 applicable statutory limit 735 ILCS 5/12-1006 401K Retirement Brief \$1,500.00 $\overline{\mathbf{V}}$ description: Account \$1,500.00 Line from 100% of fair market value, up to any Schedule A/B: 21 applicable statutory limit 735 ILCS 5/12-1001(g)(1), (2), (3); 735 Brief 2015 Expected Tax \$3,500.00 **V** ILCS 5/12-1001(b) description: Refund \$3,000.00; \$500.00 Line from 100% of fair market value, up to any Schedule A/B: 28 applicable statutory limit 735 ILCS 5/12-1001(b) Brief Term life insurance \$0.00 description: policy

100% of fair market value, up to any

applicable statutory limit

Line from

Schedule A/B:

31

	Case 15-42300	Doc 1 Filed	12/15/15 Entered 12/15	5/15 20:56:25	Desc Main	
Fill in this inform	ation to identify your case:			0/10/20.00.20	Desc Main	
Debtor 1	Shukura		Tartt			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the: <u>N</u>	orthern	District of Illinois			
Case number			(State)			
(If known)						
Official F	orm 106D					neck if this is a nended filing
Schedu	le D: Credito	rs Who Hav	e Claims Secured	d by Prope	rty	12/1
1. Do any cre No. Cr	top of any additional ditors have claims secured neck this box and submit this fill in all of the information belo	pages, write your by your property? form to the court with you	he Additional Page, fill it out, name and case number (if kr	nown).		
	All Secured Claims					
claim. If mo		rticular claim, list the othe	claim, list the creditor separately for eac er creditors in Part 2. As much as ditor's name.	Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Drive Time				\$23,000.00	\$10,525.00	\$12,475.00
Creditor's Na		Describe the propert	y that secures the claim:			
9850 India Number	napolis Blvd Street	- // REAFFIRM Value:	\$10,525.00]		
rambol	Olloot	As of the date you fil	e, the claim is: Check all that apply.			
		Contingent				
Highland City	Indiana 46322 State ZIP Code	 Unliquidated 				
,	the debt? Check one.	Disputed				
✓ Debtor		Nature of lien. Check	all that apply.			
Debtor	•		ı made (such as mortgage or secured			
=	1 and Debtor 2 only	car loan)	i made (such as mortgage or secured			
=	one of the debtors and		h as tax lien, mechanic's lien)			
another		Judgment lien from				
Check	if this claim relates to a	Other (including a		_		
	unity debt vas incurred	Last 4 digits of acco	unt number	_		
	Add the dollar value of you here:		on this page. Write that number	\$23,000.00		

Fill in	this inform	Case 15-42300 ation to identify your case		12/15/15	Entered	12/15/15	20:56:25	5 Desc	Main	
Debt	or 1	Shukura First Name	Middle Name	Tartt Last Na	ame					
Debte (Spot		First Name	Middle Name	Last N						
Unite	ed States Ba	nkruptcy Court for the:	Northern	District of Illi						
(If kno		4005/5						□ Char	ale if this is an	amonded filing
		orm 106E/F le E/F: Cre	ditors Who	Have U	nsecu	red Cla	aims		ж II tnis is an	amended filing
party 1 106A/I are lis the bo	to any exe B) and on ted in <i>Sch</i> exes on the	cutory contracts or une Schedule G: Executory edule D: Creditors Who e left. Attach the Contir	ole. Use Part 1 for creditor xpired leases that could recontracts and Unexpired to Hold Claims Secured by the page to this page Y Unsecured Claims	result in a claim. d Leases (Officia y Property. If mo . On the top of a	Also list exe al Form 106G ore space is r	cutory contrad). Do not inclu needed, copy t	ts on <i>Schedu</i> de any credito he Part you n	lle A/B: Prop ors with parti eed, fill it out	erty (Officia ally secured , number th	al Form d claims that ne entries in
1.		editors have priority unso to Part 2.	secured claims against yo	ou?						
	identify who possible, lis Part 1. If m	at type of claim it is. If a cla tt the claims in alphabetic ore than one creditor hold	claims. If a creditor has mo aim has both priority and nor all order according to the cre as a particular claim, list the	npriority amounts, editor's name. If yo other creditors in	list that claim ou have more Part 3.	here and show than two priorit	both priority an	d nonpriority a	amounts. As i	much as
	(For an exp	ianation of each type of c	laim, see the instructions fo	r this form in the II	nstruction boo	KIET.)		Total claim	Priority amount	Nonpriority amount

Filed 12/16/15 Entered 12/16/16 (20:56:25 Desc Main Shukur&Case 15-42300 Doc 1 Debtor 1 Page 24 of 72 List All of Your NONPRIORITY Unsecured Claims Part 2: Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ✓ Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 Aarons Furniture \$300.00 - Last 4 digits of account number Nonpriority Creditor's Name 4428 W North Ave When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60651 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No ☐ Yes 4.2 AT&T Mobility \$1,100.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 6416 Number Street As of the date you file, the claim is: Check all that apply. Contingent Carol Stream Illinois 60197 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No ☐ Yes 4.3 Barnes Auto \$3,398.00 Last 4 digits of account number 3752 Nonpriority Creditor's Name When was the debt incurred? 2125 N. Cicero 10/1/2011 Number As of the date you file, the claim is: Check all that apply. Contingent 60639 Chicago Illinois Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? ✓ No Yes

<u>Entered</u> 1:2/41.5/41.5/20:56:25 <u>Desc M</u>ain Shukura Case 15-42300 Doc 1 Filed 12/1/5/15 Page 25 of 72 Your NONPRIORITY Unsecured Claims - Continuation Page Total claim After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. 4.4 CCI \$502.00 Last 4 digits of account number 7822 Nonpriority Creditor's Name 3/1/2012 When was the debt incurred? 501 Greene Street # 302 Number Street As of the date you file, the claim is: Check all that apply. Contingent 30901 Augusta Georgia Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify Is the claim subject to offset? **✓** No Yes 4.5 CENTRAL FURN \$372.00 Last 4 digits of account number 8170 Nonpriority Creditor's Name When was the debt incurred? 1348 N MILWAUKEE Number Street As of the date you file, the claim is: Check all that apply. Contingent **CHICAGO** Illinois 60622 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify Is the claim subject to offset? **✓** No Yes 4.6 Check N Go - Kedzie \$300.00 Last 4 digits of account number Nonpriority Creditor's Name 800 N Kedzie Ave #225 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent 60651 Chicago Illinois Unliquidated Zip Code City Disputed Who incurred the debt? Check one.

ShukuraCase 15-42300 Doc 1 Filed 12/1/5/15 <u>Entered</u> 1:2/41/5/11.5/120:56:25 <u>Desc Main</u> Your NONPRIORITY Unsecured Claims - Continuation Page 26 of 72 Part 2: Total claim After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. 4.7 City of Chicago - Parking and red Light Tickets \$12,000.00 Last 4 digits of account number Nonpriority Creditor's Name Department of Revenue - PO Box 88292 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent 60680 Chicago Illinois Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify_ Is the claim subject to offset? **✓** No ☐ Yes \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center Number Street As of the date you file, the claim is: Check all that apply. Contingent Oakbrook Terrace Illinois 60181 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Is the claim subject to offset? **✓** No Yes \$0.00 Last 4 digits of account number 3547 Nonpriority Creditor's Name PO BOX 57071 When was the debt incurred? 9/1/2007 Number Street As of the date you file, the claim is: Check all that apply. Contingent IRVINE California 92619 Unliquidated Zip Code City Disputed Who incurred the debt? Check one.

Shukur**Case 15-42300** Doc 1 Entered 1:24:15/115/20:56:25 Desc Main Filed 12/1/5/15 Page 27 of 72 Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: Total claim After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. 4.10 Dell Computers \$700.00 Last 4 digits of account number Nonpriority Creditor's Name 2300 West Plano Parkway When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Plano Texas 75075 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.11 JVDB ASC \$9.845.00 Last 4 digits of account number 5397 Nonpriority Creditor's Name When was the debt incurred? 5/1/2013 PO Box 5718 Number Street As of the date you file, the claim is: Check all that apply. Contingent Illinois 60121 Elgin Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ✓ Debtor 1 only Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **V** No Yes 4.12 PEOPLES ENGY \$3,304.00 Last 4 digits of account number 7065 Nonpriority Creditor's Name 200 EAST RANDOLPH When was the debt incurred? 9/1/2014 Number As of the date you file, the claim is: Check all that apply.

Shukur**Case 15-42300** Doc 1 Entered 1:241-5415 @ 0:56:25 Desc Main Filed 12/1/5/15 Page 28 of 72 Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: Total claim After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. 4.13 Protege Investment \$2,400.00 Last 4 digits of account number Nonpriority Creditor's Name 8550 S HARLEM #G When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Oak Lawn Illinois 60453 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.14 Sprint \$400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 219554 Number Street As of the date you file, the claim is: Check all that apply. Contingent Missouri 64121 Kansas City Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ✓ Debtor 1 only Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.15 State of Illinois - Dept of Revenue \$10,000.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 19043 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Springfield Illinois 62794 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one.

Shukura Case 15-42300 Doc 1 Filed 12/1/5/15 <u>Entered</u> 1:24:11-5/11-5 /120:56:25 <u>Desc Main</u> Page 29 of 72 Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: Total claim After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. 4.16 SUN CASH \$300.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 598 Torrence Ave Number Street As of the date you file, the claim is: Check all that apply. Contingent Calumet City Illinois 60409 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.17 Tina Hall \$1,692.98 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1532 S St Louis Number Street As of the date you file, the claim is: Check all that apply. Contingent Illinois 60623 Chicago Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ✓ Debtor 1 only Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.18 T-Mobile \$400.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 742596 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Cincinnati Ohio 45274 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one.

Shukur&Case 15-42300 Doc 1 Entered 1:24:15/115/20:56:25 Desc Main Filed 12/1/5/15 Page 30 of 72 Your NONPRIORITY Unsecured Claims Part 2: Total claim After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. 4.19 US DEPT OF ED/GSL/ATL \$4,263.00 - Last 4 digits of account number 3543 Nonpriority Creditor's Name 9/1/2009 When was the debt incurred? PO BOX 2287 Number Street As of the date you file, the claim is: Check all that apply. Contingent ATLANTA Georgia 30301 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.20 U S DEPT OF ED/GSL/ATL \$4,113.00 Last 4 digits of account number 9796 Nonpriority Creditor's Name When was the debt incurred? 9/1/2010 PO BOX 2287 Street Number As of the date you file, the claim is: Check all that apply. Contingent ATLANTA 30301 Georgia Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ✓ Debtor 1 only Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **V** No Yes 4.21 VALUE AUTO \$14,596.00 Last 4 digits of account number 1001 Nonpriority Creditor's Name 2734 N CICERO When was the debt incurred? 10/1/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent **CHICAGO** Illinois 60639 Unliquidated State Zip Code Disputed Who incurred the debt? Check one.

Part 2: Shukur Case 15-42300 Doc 1 Filed 12/16/15 Entered 12/16/16 (20) 56:25 Desc Main

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

After listing	g any entries on this page, nu	mber them beginnin	g with 4.5, followed by 4.6, and so forth.	Total claim					
William A R Nonpriority 2106 S Han Number	Creditor's Name		When was the debt incurred?						
Debtor Debtor Debtor At least	•	60623 Zip Code	 Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify 						

Part 3: Shukur Case 15-42300 Doc 1 Filed 12/1/15/15 Entered 12/1/15/15 Entered 12/1/15/15 Desc Main

Part 3: Shukur Case 15-42300 Doc 1 Filed 12/1/15/15 Entered 12/1/15/15 Desc Main

Page 32 of 72

List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. AT&T Mobility II LLC On which entry in Part 1 or Part 2 did you list the original creditor? of (Check one): Part 1: Creditors with Priority Unsecured Claims One AT&T Way Room 3A104 Number Part 2: Creditors with Nonpriority Unsecured New Jersey Last 4 digits of account number 07921 Bedminster City State Zip Code

Debtor 1 Shukur Case 15-42300 Doc 1
First Name Middle Name Filed 12/16/15 Entered 12/16/16 20:56:25 Desc Main

Document Page 33 of 72

Part 4: First Name Middle Name DOCUMENT Add the Amounts for Each Type of Unsecured Claim

		nts of certain types of unsecured claims. This information is fo as for each type of unsecured claim.	r sta	ntistical reporting purposes only. 20	8 U.S.C. §159.
				Total claims	
Total claims from Part 1	6a.	Domestic support obligations.	6a.	\$0.00	
iioiii r ait i	6b.	Taxes and certain other debts you owe the	6b.	\$0.00	
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00	
	6e.	Total. Add lines 6a through 6d.	6e.	\$0.00	
				Total claims	
Total claims from Part 2	6f.	Student loans	6f.	\$0.00	
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$73,010.98	
	6j.	Total. Add lines 6f through 6i.	6j.	\$73,010.98	

	Case 15-4230	00 Doc 1 Filed	1 12/15/15	Entered 12/	15/15 20:56:25	Desc Main
Fill in this	information to identify your cas				0/10/20:00:20	Description
Debtor 1	Shukura		Tartt	J		
	First Name	Middle Name	Last Na	ame		
Debtor 2						
(Spouse,	if filing) First Name	Middle Name	Last Na	ame		
United St	ates Bankruptcy Court for the:	Northern	District of Illin	nois		
Case nur	nhor		(St	tate)		
(If known)						
Offic	ial Form 106G					Check if this is a amended filing
Sche	dule G: Execut	tory Contract	s and Un	expired Lo	eases	12/1
space is r case num 1. Do y		page, fill it out, number the contracts or unexpi	ne entries, and atta	ach it to this page.	On the top of any addition	ng correct information. If more onal pages, write your name and
✓ Y	es. Fill in all of the information b	pelow even if the contracts of	or leases are listed o	on Schedule A/B: Pro	operty (Official Form 106A/	/B).
	eparately each person or colle lease, cell phone). See the					
F	Person or company with who	m you have the contract	or lease		State what the contract	or lease is for
2.1 Pa	tel, Jody				Residential Lease,	
Na	me			-	Debtor is Lessee, Debtor's residential lease	
22	42 S 53rd Ave				Dobiol 3 residential lease	
Nu	mber Street			_		
Cio	cero II	linois 608	304	=		
Cit	y S	State Zip	Code			

		0 45 4000	O D. 4 Filada	0/45/45 5 5 5 5 5 5 6	10/45/45 00 50 05	Dana Maia
Fill	in this inform	Case 15-4230 nation to identify your cas		7/15/15 Enteren	12/15/15 20:56:25	Desc Main
De	btor 1	Shukura		Tartt		
		First Name	Middle Name	Last Name		
	btor 2 ouse, if filing	First Name	Middle Name	Last Name	-	
Un	ited States Ba	ankruptcy Court for the:	Northern	District of Illinois		
	se number			(State)	_	
	· · · · · · · · · · · · · · · · · · ·	400LL				Check if this is a amended filing
		Form 106H e H: Your Co	odebtors			12/1:
	Do you have No	ve any codebtors? (If yo	ou are filing a joint case, do not	iist either spouse as a codebto	r.)	
2.	Louisiana, N No. Ge Yes. D	Nevada, New Mexico, Puo o to line 3.	ived in a community propert erto Rico, Texas, Washington, a pouse, or legal equivalent live w	nd Wisconsin.)	unity property states and territon	es include Arizona, California, Idaho,
		es. In which community s	tate or territory did you live?	Fill	in the name and current addres	ss of that person.
		Name of your spouse, f	ormer spouse, or legal equivale	nt		
		Number Street				
		City	State	Zip Code		
3.	as a codeb	tor only if that person		ake sure you have listed the	creditor on Schedule D (Of	the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> olumn 2.
	Column 1:	Your codebtor			Column 2: The creditor to	whom you owe the debt

Check all schedules that apply:

An amended filing An amended filing A supplement showing post-petition chapter expenses as of the following date: An amended filing A supplement showing post-petition chapter expenses as of the following date: An amended filing A supplement showing post-petition chapter expenses as of the following date: An amended filing A supplement showing post-petition chapter expenses as of the following date: An amended filing A supplement showing post-petition chapter expenses as of the following date: An amended filing A supplement showing post-petition chapter expenses as of the following date: An amended filing A supplement showing post-petition chapter expenses as of the following date: An amended filing A supplement showing post-petition chapter expenses as of the following date: An amended filing A supplement showing post-petition chapter expenses as of the following date: An amended filing A supplement showing post-petition chapter A supplement showing post-petition chapter A suppl	Fill in this	s information to identify	your case:			5/15 20	:56:25	Desc Mai	n
First Name					age oo o r	72			
Second Filling First Name Middle Name Last N	Jeptor 1		Middle Name		ne.	-			
A amended filling A supplement showing post-petition chapte expenses as of the following date:	Debtor 2		madio Hamo				Check if this i	s:	
State State Stankruptcy Court for the: Northern District of Illinois Expenses as of the following date:		First Name	Middle Name	Last Nam	ie	-	An ameno	ded filing	
Describe Employment Semployed Semplo	Jnited State	es Bankruptcy Court for the:	Northern			-			
e as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally sponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, clude information about your spouse. If you are separated and your spouse is not filing with you, do not include formation about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's address Employer's address Employer's address To row self-employed work. Occupation may include student or homemaker, if it applies. Deerfield Florida 33442 Deerfield Florida 33442 City State Zip Code	Case numbe If known)	er		(Stat	.c)	-	MM / DD	/ YYYY	
as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally sponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, clude information about your spouse. If you are separated and your spouse is not filing with you, do not include formation about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment Debtor 1	Officia	l Form 106l							
sponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, clude information about your spouse. If you are separated and your spouse is not filling with you, do not include formation about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. 2art 1: Describe Employment I. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's address Coverall North America Inc Employer's address 350 SW 12th Ave Number Street Number Street Deerfield Florida 33442 City State Zip Code	Sched	lule I: Your Inc	ome						12
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employment status Inside Sales Associate Coverall North America Inc Employer's name Coverall North America Inc Sales Associate Coverall North America Inc Inside Sales Associate Employer's name Coverall North America Inc Inside Sales Associate Employer's name Coverall North America Inc Inside Sales Associate Employer's name Coverall North America Inc Inside Sales Associate Employer's name Employer's name Employer's name Coverall North America Inc Inside Sales Associate Deerfield Florida 33442 Each City State Zip Code How long employed thers?	nformation ages, wr	on about your spouse ite your name and ca	e. If more space is neede se number (if known). A	ed, attach a	separate sl				
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Deerfield Florida 33442 Beach City State Zip Code City C				Debtor 1			Debtor 2		
if you have more man one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's address So SW 12th Ave Number Street Deerfield Florida 33442 Beach City State Zip Code Not Employed Not Employed Not Employed Not Employed Inside Sales Associate Coverall North America Inc Number Street Number Street City State Zip Code	ı	information.	Employment status	✓ Employed			Employe	ad	
attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Deerfield Florida 33442 Beach City State Zip Code Inside Sales Associate Coverall North America Inc Street Number Street Deerfield Florida 33442 Beach City State Zip Code		•							
information about additional employers. Employer's name Coverall North America Inc Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Deerfield Florida 33442 Beach City State Zip Code Inside Sales Associate Coverall North America Inc Street Number Street Deerfield Florida 33442 City State Zip Code				☐ Not Emplo	oyea		☐ Not Emp	оюуea	
Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Deerfield Florida 33442 Beach City State Zip Code How long employed there?		information about additional	Occupation	Inside Sales A	Associate				
or self-employed work. Occupation may include student or homemaker, if it applies. Deerfield Florida 33442 Beach City State Zip Code How long employed there?	6	employers.	Employer's name	Coverall North America Inc					
or self-employed work. Occupation may include student or homemaker, if it applies. Deerfield Florida 33442 Beach City State Zip Code How long employed there?	I	Include part time, seasonal,	Employer's address	350 SW 12th A	\ve				
Occupation may include student or homemaker, if it applies. Deerfield Florida 33442 Beach City State Zip Code How long employed there?			Employer 5 dudie55		100		Number Stree	t	
student or homemaker, if it applies. Deerfield Florida 33442 Beach City State Zip Code How long employed there?	•	seii-еттрюуей work.							
or homemaker, if it applies. Deerfield Florida 33442 Beach City State Zip Code City State Zip Code		· ·							
City State Zip Code					Florida	33442	City	State	7in Codo
How long employed there?					State	Zip Code	City	State	Zip Code
<u> </u>			How long employed there?	•		р			
Part 2: Give Details About Monthly Income				<u>o years</u>					
			date you file this form. If you ha	ave nothing to re	port for any line	e, write \$0 in the s	space. Include	your non-filing	spouse unless you
	f you or yo	our non-filing spouse have mo	re than one employer, combine th	ne information fo	r all employers	for that person on	the lines belo	w. If you need r	nore space, attach
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.	55541410	225.10 1 191111			For	Debtor 1			
are separated.					2.	\$3,284.04			
are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse	3. Estin	nate and list monthly overt	ime pay.		3	+ \$0.00			
are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 End Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.	4. Calcu	ulate gross income. Add line	e 2 + line 3.		4.	\$3,284.04			

Filed 12/41/5/15 Debtor 1 Shukura Case 15-42300 Entered 12/15/16 20:56:25 Desc Main Doc 1 Documentame Page 37 of 72 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4. \$3,284.04 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$465.55 5b. Mandatory contributions for retirement plans 5b. \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$0.00 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. -\$59.17 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$524.72 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$2,759.32 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$0.00 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$0.00 settlement, and property settlement. 8c. 8d. Unemployment compensation \$0.00 8d. 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies \$0.00 Specify: 8f. 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$500.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$3,259,32 \$3,259,32 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Voluntary Household Contributions \$0.00 11. + 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies \$3,259,32 Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No Yes. Explain:

Debtor 1 Shukura Case 15-42300 Doc 1 Filed 12/alt5/15 Entered 12/alt5/15 20:56:25 Desc Main

First Name Middle Name Documentame Page 38 of 72
For Debtor 1 For Debtor 2 or non-filing spouse

5h.Other payroll deductions. Specify:

1. Dental \$42.08
2. Life Insurance \$10.99
3. Vision \$6.11

	Case 15-423	00 Doc 1 Filed 12	2/15/15 Entered 12/1	5/15 20:56:25	Desc Main	
Fill in this infor	mation to identify your ca		Ü			
Debtor 1	Shukura		Tartt			
	First Name	Middle Name	Last Name			
Debtor 2	, 			Check if this is:		
(Spouse, if filir	ng) First Name	Middle Name	Last Name	An amended filir	ıg	
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)		nowing post-petition on the following date:	chapter 13
Case number (If known)						
(MM / DD / YYY	Y	
Official	Form 106J					
	le J: Your E	vnoneoe				12/1
Be as complet information. If if known). Ans	e and accurate as pos	sible. If two married people are I, attach another sheet to this fo	filing together, both are equally r orm. On the top of any additional			r
1. Is this a joi						
	o to line 2					
Yes. L	oes Debtor 2 live in a	separate nousehold?				
	No					
	Yes. Debtor 2 must f	ile Official Forms 106J-2, <i>Expense</i>	es for Separate Household of Debto	r 2.		
2. Do you ha	ve dependents?	No				
Do not list Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does depende with you?	nt live
			Child	15 years	No.	
					✓ Yes.	
			Child	16 years	☐ No. ✓ Yes.	
			Child	17 voors	Yes.	
			Crilla	17 years	Yes.	
			Child	19 years	No.	
					✓ Yes.	
-	•	No Yes				
Part 2: Esti	imata Vaur Ongoin	g Monthly Expenses				
				amout in a Charter 40		
•	of a date after the ban		ou are using this form as a suppl lemental Schedule J, check the l	-	•	
•	•	-cash government assistance if it on Schedule I: Your Income			Your	expenses
	or home ownership ex or the ground or lot. 4.	xpenses for your residence. Incl	ude first mortgage payments and		4.	\$1,000.00
If not inc	luded in line 4:					
4a. Real e	estate taxes				4a	\$0.00
4b. Prope	erty, homeowner's, or ren	ter's insurance			4b	\$0.00
4c. Home	maintenance, repair, and	l upkeep expenses			4c	\$0.00
4d. Home	owner's association or co	ondominium dues			4d.	\$0.00

Debtor 1 Shukur Case 15-42300 Doc 1 Filed 12/16/15 Entered 12/16/16 (20) 56: 25 Desc Main

First Name Middle Name Documetifithe Page 40 of 72		
		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$180.00
6b. Water, sewer, garbage collection	6b.	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$225.00
6d. Other. Specify:	6d	\$0.00
7. Food and housekeeping supplies	7.	\$500.00
8. Childcare and children's education costs	8.	\$40.00
9. Clothing, laundry, and dry cleaning	9.	\$75.00
10. Personal care products and services	10.	\$115.00
11. Medical and dental expenses	11.	\$230.00
12. Transportation. Include gas, maintenance, bus or train fare.		\$330.00
Do not include car payments	12.	
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions and religious donations	14.	\$0.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$92.00
15d. Other insurance. Specify:	15d	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.00
17. Installment or lease payments:	10	
17a. Car payments for Vehicle 1	17a	\$460.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from		\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property		** 0.00
20b. Real estate taxes 20b.	20a	\$0.00
20c. Property, homeowner's, or renter's insurance	20b	\$0.00
20d. Maintenance, repair, and upkeep expenses 20d.	20c	\$0.00
20e. Homeowner's association or condominium dues	20d	\$0.00
200. Floritormora association of condominating acca	20e	\$0.00

	kur Case 15-42300	Doc 1	Filed 12/1/5/15	Entered 12/45/15/20:56:25	Desc Main	
21. Other. Spec		Middle Name	Docume nt	Page 41 of 72	21	\$0.00
_	your monthly expenses.				_	\$3,247.00
22a. Add lin	nes 4 through 21.				_	\$0.00
22b. Copy li	ine 22 (monthly expenses for I	Debtor 2), if any	y, from Official Form 106J	-2	_	\$3,247.00
22c. Add lin	e 22a and 22b. The result is yo	our monthly ex	penses.		22.	
23. Calculate y	our monthly net income.					
23a. Copy li	ine 12 (your combined monthly	y income) from	Schedule I.		23a	\$3,259.32
23b. Copy y	our monthly expenses from line	e 22 above.			23b	\$3,247.00
	ct your monthly expenses from		ncome.			\$12.32
The re	esult is your monthly net incom	ne.			23c	
24. Do you ex	pect an increase or decreas	se in your exp	enses within the year af	ter you file this form?		
	ole, do you expect to finish pay	0 ,	,	, ,		
mortgage	payment to increase or decrea	ase because o	r a modification to the term	is of your mortgage?		
✓ No						
Yes						
	Explain here:					

		Case 15-4230	0 Doc 1 Filad	12/15/15	Entored 13)/1E/1E 20:E6	:25 Desc Mai	in
Fill ir	n this inform	ation to identify your case		[7][.][.]		21.3/13 20.30	.23 Desc Mai	11 1
Debt	tor 1	Shukura		Tartt				
	_	First Name	Middle Name	Last N	ame			
Debt (Spo		First Name	Middle Name	Last N	lame			
Unite	ed States Ba	ankruptcy Court for the:	Northern	District of III	inois			
Coor		, ,		(5	State)			
(If kn	e number own)							
Off	ficial F	Form 106De	<u>C</u>			 '		Check if this is an amended filing
De	clarat	ion About a	n Individual D	ebtor's	Schedule	S		12/1
lf two	married p	eople are filing togethe	er, both are equally respon	nsible for supply	ying correct inforr	mation.		
1519, Part	and 3571. 1: Sign	Below	bankruptcy case can resu					
	✓ No							
ĺ	Yes. N	lame of person			n Bankruptcy Petitio ture (Official Form 1	on Preparer's Notice, 119).	Declaration, and	
	•	re true and correct.	e that I have read the sum	mary and sched	dules filed with this	s declaration and		
;	Signature o	f Debtor 1			Signature of D	Debtor 2		
	Date <u>12/16</u> MM/	5/2015 DD/YYYY			Date	D/YYYY		

	this inform	Case 15-4230 ation to identify your ca		Filed	12/15/15	Entered 12/	1 5/15 20:56:2!	5 Desc l	Main
Debt		• •			Tartt	Ü	7		
Debt	OI I	Shukura First Name	Middle	Name	Last Nar	me			
Debt		First Name	Middle	Nama	Loot Nor				
				IName	Last Nar				
Unite	ed States Ba	ankruptcy Court for the:	Northern		District of Illin				
Case (If knd	number own)				•	<u> </u>			
Off	icial F	orm 107					_		Check if this is a amended filing
			cial Affairs	for	Individua	ls Filina i	for Bankrup	otcv	12/1
Be as	complete	and accurate as poss	sible. If two married	l people	are filing togethe	r, both are equally	responsible for sup	plying correct	information. If more
pace	is needed	, attach a separate sh	neet to this form. Or	n the top	of any additional	pages, write you	r name and case num	nber (if known).	. Answer every question
Part	1: Give	Details About You	ur Marital Statu	s and V	Vhere You Live	ed Before			
1.	What is y	your current marital s	status?						
	Marr	ried							
	✓ Not r	married							
2.	During th	ne last 3 years, have y	ou lived anywhere	other tha	an where you live	now?			
	□ No								
		List all of the places you	u lived in the last 3 ye	ars. Do n	ot include where yo	ou live now.			
	Debt	or 1:			s Debtor 1 lived	Debtor 2:			ates Debtor 2 lived
	Debt	tor 1:		Date: there		_			ates Debtor 2 lived nere
	Debt	or 1:				Debtor 2:	ebtor 1		
	11932	2 S Spalding Ave		there		Same as D		th	nere
	11932			there	12/1/2012	_		th C Fr	Same as Debtor 1
	11932 Numl	2 S Spalding Ave ber Street	00000	there		Same as D		th	Same as Debtor 1
	11932	2 S Spalding Ave ber Street	60623 Zip Code	there	12/1/2012	Same as D	it	th C Fr	Same as Debtor 1
	11932 Numb	2 S Spalding Ave ber Street		there	12/1/2012	Same as D	st State Zip	th	Same as Debtor 1
	Numl Chica	2 S Spalding Ave ber Street ago Illinois State		there	12/1/2012 6/1/2015	Same as D Number Stree	st State Zip	From To	Same as Debtor 1 rom Same as Debtor 1
	11932 Numl Chica City	2 S Spalding Ave ber Street		there	12/1/2012 6/1/2015	Same as D Number Stree	state Zip Debtor 1	From To	Same as Debtor 1
	11932 Numl Chica City	2 S Spalding Ave ber Street ago Illinois State		there	12/1/2012 6/1/2015	Same as D Number Stree City Same as D	state Zip Debtor 1	From To	Same as Debtor 1 Tom Same as Debtor 1 Same as Debtor 1
	11932 Numl Chica City	2 S Spalding Ave ber Street ago Illinois State S 51st Ave ber Street		there	12/1/2012 6/1/2015	Same as D Number Stree City Same as D	State Zip Debtor 1	th From Code From From From From From From From From	Same as Debtor 1 Tom Same as Debtor 1 Same as Debtor 1

	First Name Middle Na	Document Document	Page 44 of 72		
Part	2: Explain the Sources of Your Inc	ome			
4.	Did you have any income from employment Fill in the total amount of income you received fractivities. If you are filing a joint case and you ha No Yes. Fill in the details.	rom all jobs and all businesses,	including part-time		
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$38760.45	Wages, commissions, bonuses, tips Operating a business	
	For last calendar year: (January 1 to December 31, 2014) YYYY	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$37000.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	
	For last calendar year: (January 1 to December 31, 2013) YYYY				
;	Did you receive any other income during this Include income regardless of whether that income benefit payments; pensions; rental income; intereand you have income that you received together, List each source and the gross income from each No Yes. Fill in the details.	e is taxable. Examples of other est; dividends; money collected list it only once under Debtor 1.	income are alimony; child su from lawsuits; royalties; and	gambling and lottery winnings.	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	SSI for son	\$5390.00		
	For last calendar year: (January 1 to December 31, 2014) YYYY	SSI for son	\$9240.00		
	For last calendar year:	SSI for son	9240.00		

(January 1 to December 31,

Debtor 1 ShukuraCase 15-42300 First Name Filed 12/16/15 Entered 12/16/16 20:56:25 Desc Main Document Page 45 of 72 Doc 1

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6.	Are eitl	her Deb	otor 1's or	Debtor 2's	debts primarily con	sumer debts?			
	✓ No				tor 2 has primarily c usehold purpose."	onsumer debts. Cons	umer debts are defined in 11	U.S.C. § 101(8) as "incurre	d by an individual primarily
		Durin	g the 90 d	ays before y	ou filed for bankruptcy,	did you pay any credito	r a total of \$6,225* or more?		
		V 1	No. Go to	line 7.					
			total	amount you	paid that creditor. Do	not include payments fo	more in one or more payment r domestic support obligation attorney for this bankruptcy ca	s, such as	
		* Sub	ject to adj	ustment on 4	/01/16 and every 3 yea	ars after that for cases fi	led on or after the date of adju	stment.	
	☐ Yes	s. Debt	or 1 or De	ebtor 2 or b	oth have primarily c	onsumer debts.			
	_						r a total of \$600 or more?		
			No. Go to		· · · · · · · · · · · · · · · · · ·	,			
					raditar ta whom you be	oid a total of \$600 or ma	re and the total amount you p	aid	
		٦	that	creditor. Do	not include payments		ligations, such as child suppo		
						Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	C	creditor's	s Name						Mortgage Car
	N	lumber	Street						Credit card
									Loan repayment Suppliers or
	C	City		State	Zip Code				vendors
	_								Other
	C	reditor's	s Name				-		Mortgage Car
	N	lumber	Street						Credit card
	_								Loan repayment
	C	City		State	Zip Code				Suppliers or vendors
		,			·				Other
	C	reditor's	s Name				-		- Mortgage
	-	Lastina	011						Car
	N	lumber	Street						Credit card Loan repayment
	_								Suppliers or
	C	City		State	Zip Code				vendors
									Other

Doc 1 Filed 12/145/15 Entered 12/15/16 (20:56:25 Desc Main Debtor 1 Document Page 46 of 72 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment Insider's Name Number Street Citv State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 Shukur Case 15-42300 Doc 1 Filed 12/14/5/15 Entered 1:2/14/5/14/5/12/6/56:25 Desc Main
First Name Document Page 47 of 72

	n 1 year before you filed for bankruptcy, v I such matters, including personal injury case ies.					
	No 'es. Fill in the details.					
		Nature of the case	Court or age	ency		Status of the case
	Case title	Joint Action	Cook County	/ Circuit Court		Pending
	Protege Investments v. Shukura Tartt Love		Court Name			On appeal
	Case number			shington Street		Concluded
	2015-M4-005222		Number Stre Chicago	eu Illinois	60602	_
			City	State	Zip Code	_
	Case title					Pending
			Court Name			On appeal
	Case number		<u> </u>			Concluded
			Number Stre	eet		
			City	State	Zip Code	_
✓	No. Go to line 11. Yes. Fill in the information below.	Describe the pro		oseu, garnisne	ed, attached, s	
✓	No. Go to line 11.	Describe the pro		oseu, garriisire	Date	Value of the property
	No. Go to line 11.	Describe the pro		oseu, garriisire		Value of the
▽	No. Go to line 11. Yes. Fill in the information below.	Describe the pro	operty	oseu, garriisiik		Value of the
	No. Go to line 11. Yes. Fill in the information below.		operty	oseu, garriisire		Value of the
	No. Go to line 11. Yes. Fill in the information below. Creditor's Name	Explain what ha	operty	oseu, garriisiik		Value of the
	No. Go to line 11. Yes. Fill in the information below. Creditor's Name	Explain what ha	ppened s repossessed.	oseu, garriisin		Value of the
	No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what ha	ppened s repossessed. s foreclosed.	oseu, garriisire		Value of the
	No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what ha Property was Property was Property was	ppened s repossessed. s foreclosed.			Value of the
	No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what ha Property was Property was Property was	ppened s repossessed. s foreclosed. s garnished. s attached, seized, or			Value of the
	No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what ha	ppened s repossessed. s foreclosed. s garnished. s attached, seized, or		Date	Value of the property Value of the
	No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	Explain what hat Property was Property was Property was Property was Property was Describe the pro	ppened s repossessed. s foreclosed. s garnished. s attached, seized, or		Date	Value of the property Value of the
	No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State Zip C	Explain what ha	ppened s repossessed. s foreclosed. s garnished. s attached, seized, or		Date	Value of the property Value of the
	No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State Zip C	Explain what hat Property was Property was Property was Property was Property was Describe the pro	ppened s repossessed. s foreclosed. s garnished. s attached, seized, or		Date	Value of the property Value of the
	No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State Zip Co	Explain what ha Property was Property was Property was Property was Property was Explain what ha	ppened s repossessed. s foreclosed. s garnished. s attached, seized, or		Date	Value of the property Value of the
	No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State Zip Co	Explain what ha Property was Property was Property was Property was Property was Explain what ha Property was	ppened s repossessed. s foreclosed. s attached, seized, or operty ppened s repossessed. s foreclosed.		Date	Value of the property Value of the

Debt			<u>a 127a6/15 Entered</u> baselohiba <i>iiabii</i> bb: ocumente Page 48 of 72	25 Desc	Main
11.	With		creditor, including a bank or financial institution, set of	f any amounts fr	om vour
•••		ounts or refuse to make a payment because you owe		runy amounto n	om you.
	V	No			
	Ħ	Yes. Fill in the details.			
			Describe the property	Date	Value of the
					property
		Creditor's Name			
		Number Street			
		Number Street			
		City State Zip Code	Last 4 digits of account number: XXXX-		
12.		in 1 year before you filed for bankruptcy, was any of ver, a custodian, or another official?	f your property in the possession of an assignee for the	e benefit of credi	tors, a court-appointed
	_				
	=	No Voe			
	<u> Ц</u>	Yes			
Part	5: I	ist Certain Gifts and Contributions			
13.	\ \ /i4	hin 2 years before you filed for hankruntey did you	give any gifts with a total value of more than \$600 per	nerson?	
13.	-		give any girts with a total value of more than \$000 per	person:	
	뇓	No			
	Ш	Yes. Fill in the details for each gift.	Describe the wife	Datas	Value
		Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Person to Whom You Gave the Gift			
		Number Street			
		City State Zip Code			
		Person's relationship to you			
		T classifia to determine to you			
		Person to Whom You Gave the Gift			
		reison to whom fou gave the Gilt			
		Number Street			
		Number Street City State Zip Code			

Debtor	1		<u>ed 12/15/15 Entered</u> 12/15/15 (20)56 ocumeที่ใ ^ก Page 49 of 72	: <u>25 Desc</u>	Main
14. V	Nith		give any gifts or contributions with a total value of mor	e than \$600 to ar	ny charity?
Ŀ	✓	No			
		Yes. Fill in the details for each gift or contribution.			
		Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
			-		
		Charity's Name			
		Number Street			
		City State Zip Code	-		
Part 6:	I	ist Certain Losses			
	am	in 1 year before you filed for bankruptcy or since y bling? No	ou filed for bankruptcy, did you lose anything because	of theft, fire, othe	r disaster, or
Ĺ]	Yes. Fill in the details.			
		Describe the property you lost and	Describe any insurance coverage for the loss	Date of your	Value of property lost
		how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i>	loss	
		List Certain Payments or Transfers			
]	No Yes. Fill in the details.	it counseling agencies for services required in your bankrupt	-y.	
	_		Description and value of any property transferred	Date payment or transfer	
		Venturini 6203500, Marcie			Amount of payment
		Person Who Was Paid	0.00	was made	
			- 0.00		Amount of payment \$0.00
		Number Street	- 0.00	was made	
			- 0.00	was made	
		Number Street City State Zip Code Email or website address	-0.00	was made	
		City State Zip Code	- 0.00	was made	
		City State Zip Code Email or website address	- 0.00	was made	
		City State Zip Code Email or website address Person Who Made the Payment, if Not You	- 0.00	was made	
		City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street	-0.00	was made	
		City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street City State Zip Code	-0.00	was made	
		City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street	- 0.00	was made	

	1 ShukuraCase 15-42300 First Name	Doc 1 File	ed 12 <u>f15/15 Entered</u> 12 Document Page 50 of 7	seldində (<i>izdə</i> və) 0 72	. <u>25 Desc</u>	IVICIII
yo	lithin 1 year before you filed for babu deal with your creditors or to monot include any payment or transfer	ankruptcy, did you o ake payments to yo	or anyone else acting on your behalf pour creditors?		property to anyor	ne who promised to hel
∠	No Yes. Fill in the details.					
	•		Description and value of any prop	erty transferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid		-			
	Number Street		-			
	City State	Zip Code	_			
tra	Insfers that you have already listed or No Yes. Fill in the details.	ı u iis statement.				
			Description and value of any property transferred		property or paymebts paid in exch	
	Person Who Was Paid					
	Person Who Was Paid Number Street		- -			
		Zip Code	- -			
	Number Street City State	Zip Code	- - -			
	Number Street City State Person's relationship to you	Zip Code	- - -			
	Number Street City State Person's relationship to you Person Who Was Paid	Zip Code Zip Code	-			
	Number Street City State Person's relationship to you Person Who Was Paid Number Street City State Person's relationship to you	Zip Code bankruptcy, did yo	u transfer any property to a self-settle	ed trust or similar d	evice of which yo	u are a beneficiary?
	Number Street City State Person's relationship to you Person Who Was Paid Number Street City State Person's relationship to you lithin 10 years before you filed for hese are often called asset-protection	Zip Code bankruptcy, did yo	u transfer any property to a self-settle	ed trust or similar d	evice of which yo	u are a beneficiary?
(T	Number Street City State Person's relationship to you Person Who Was Paid Number Street City State Person's relationship to you lithin 10 years before you filed for these are often called asset-protection	Zip Code bankruptcy, did yo			evice of which yo	
(T	Number Street City State Person's relationship to you Person Who Was Paid Number Street City State Person's relationship to you fithin 10 years before you filed for hese are often called asset-protectio	Zip Code bankruptcy, did yo	u transfer any property to a self-settle Description and value of the prop		evice of which yo	u are a beneficiary? Date transfer was made

Debtor 1 ShukuraCase 15-42300 First Name Doc 1

Document Page 51 of 72 Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

or	ithin 1 year before you filed for bankrup transferred?						
	clude checking, savings, money market, or coperatives, associations, and other financia		ounts; certificates of depo	osit; shares in ba	anks, credit unions, broker	age houses, pens	on funds,
✓	No						
	Yes. Fill in the details.						
			ast 4 digits of account umber	Type of instrun	f account or nent	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Person Who Was Paid	X	XXX-		ecking vings		
	Number Street				ney market		
	City State 7	n Codo			okerage		
	City State Z	p Code		Oth			
	Person Who Was Paid	X	XXX-		ecking vings		
	Number Street				ney market okerage		
	City State Zi	p Code		Oth			
✓	No Yes. Fill in the details.	Who	else had access to it?		Describe the contents	s	Do you still
							have it?
	Name of Financial Institution	Name					☐ No ☐ Yes
	Number Street	Numb	er Street		•		
	City State Zip C	Code City	State	Zip Code			
2. Ha	ave you stored property in a storage uni	or place other t	han your home within	1 year before y	ou filed for bankruptcy	?	
✓	No						
	Yes. Fill in the details.						
		Who	else had access to it?		Describe the content	s	Do you still have it?
	Name of Storage Facility	Name					□ No
	Number Street	Numb	er Street				Yes
	City State Zip C	code City	State	Zip Code			

Part	a -	Identify Prope	rty You H	old or Contro	Docum	•	ge 52 of 72		
							operty you borro	owed from, are storing for, or hold in tr	ust for someone.
		Yes. Fill in the deta	ails.						
					Where is the	he property?		Describe the contents	Value
		Owner's Name			Number Str	reet		-	
		Number Street			City	State	Zip Code	-	
		City	State	Zip Code	_				
Part	10:	Give Details	About Env	rironmental Ir	nformation				
For		urpose of Part 10, t							
·	Solution Science Scien	azardous material uxic substance, haz	tion, facility, or rate, or utilize means anythin ardous mater and proceedi	property as define it, including dispo ng an environment ial, pollutant, conta ngs that you know	ed under any er isal sites. tal law defines a aminant, or sim v about, regardl	nvironmental law, as a hazardous v iilar term. ess of when they	whether you now vaste, hazardous	vown, operate, or utilize it substance, violation of an environmental law?	
	_				Governme	ntal unit		Environmental law, if you know it	Date of notice
		Name of site			Governmen	tal unit		-	
		Number Street			Number Str	reet		-	
		City	State	Zip Code	City	State	Zip Code	_	
25.	Hav	e you notified any	governmer	ntal unit of any re	elease of haza	ırdous material	?		
	✓	No Yes. Fill in the deta	ails.						
	_				Governme	ntal unit		Environmental law, if you know it	Date of notice
		Name of site			Governmen	tal unit		-	
		Number Street			Number Sti	reet		-	
		City	State	Zip Code	City	State	Zip Code	_	

Debtor 1 Shukur Case 15-42300 Doc 1 Filed 12/16/15 Entered 12/16/16/16 (20) 56:25 Desc Main

Debt	or 1	ShukuraCase 15	-42300				√11.5 /20.56: <u>25</u>	Desc Main
		First Name	N	Middle Name D	ocument P	age 53 of 72		
26.	Have	e you been a party ir	n any judicial	or administrative	proceeding under a	ny environmental law	? Include settlements	and orders.
	V	No						
	百	Yes. Fill in the details						
				Co	urt or agency		Nature of the case	Status of the
								case
		Case title						Pending
				Co	urt Name			
								On appeal
				Nu	mber Street			Concluded
		Case number		Cit	y State	Zip Code		_
		•		Oil	y State	Zip Code		
Part	11:	Give Details Ab	out Your B	usiness or Cor	nections to Any	/ Business		
27	/V/:TF	in Avenue before ve	filed for be	mlenomane did seno	a bainaaa ar b	ave any of the fallow	ing compositons to an	ny hysinassa
27.	vvitr	iin 4 years before yo	ou filed for ba	nkruptcy, ala you	own a business or n	ave any of the follow	ing connections to an	ly business?
				•		, either full-time or part	-time	
			•	company (LLC) or lin	mited liability partnersh	nip (LLP)		
		A partner in a pa						
			_	g executive of a cor				
		An owner of at le	east 5% of the	voting or equity sec	urities of a corporation			
	✓	No. None of the above	e applies. Go t	o Part 12.				
		Yes. Check all that ap	ply above and	fill in the details belo	ow for each business.			
					Describe the natu	re of the business		lentification number Do not
							include Soc	ial Security number or ITIN.
		Business Name			-		EIN:	
		Dusiness Name						
		Number Street			-		Dates busin	ess existed
					Name of account	ant or bookkeeper		
		City	State	Zip Code			From	То
					Describe the natu	re of the business		lentification number Do not
							include Soc	ial Security number or ITIN.
		Business Name			-		EIN:	
		Duoi:1000 Hallic						
		Number Street			-		Dates busin	ess existed
					Name of account	ant or bookkeeper		
		City	State	Zip Code	_		From	To
					Describe the natu	re of the business		lentification number Do not
							include Soc	ial Security number or ITIN.
		Designed Name			_		EIN:	
		Business Name						
		Number Street			-		Dates busin	ess existed
		3. 3.100.			Name of account	ant or bookkeeper		
		City	State	Zip Code	_		From	To
		-		•				<u>-</u>

Debt	or 1	ShukuraCas First Name	e 15-42300	Doc 1		1 12/1/5/15 cumethtme		<u>red</u> 1:2/1.5/115/20:56: <u>2</u> 54 of 72	25 Desc Main	
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions creditors, or other parties.								ons,		
	✓	No Yes. Fill in the	details below.							
	_					Date issued				
		Name				MM/DD/YYYY				
		Number St	treet							
		City	State	Zip Cod	de					
Part	12:	Sign Belo	w							
а	nd c	orrect. I unde	erstand that makin	g a false state	ement, c	oncealing prop	erty, or ob	, and I declare under penalty o taining money or property by tes, or both. 18 U.S.C. §§ 152, 13	fraud in connection with a	true
		9	ignature of Debtor	1				Signature of Debtor 2		
		С	Date 12/16/2015					Date		
	Did y	ou attach add	litional pages to Y	our Statemen	t of Fina	ncial Affairs fo	· Individua	als Filing for Bankruptcy (Offic	ial Form 107)?	
Į.	✓ N	No								
	Y	′es								
	Did y	ou pay or agr	ee to pay someon	e who is not a	ın attorne	ey to help you fi	II out ban	kruptcy forms?		
[✓ N	No.								
	☐ Y	es. Name of p	erson					Attach the Bankruptcy Pe Declaration, and Signatur	•	

	Case 15-4230	O Doc 1 Filed 1	10/15/15	Entered 10	/1E/1E 20:E6:2E	Doog Main
Fill in this informa	ation to identify your case		1/15/15	Ellieren 12	<i>/</i> 15/15 20:56:25	Desc Main
Debtor 1	Shukura		Tartt			
	First Name	Middle Name	Last Nar	ne		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nar	ne		
United States Ba	inkruptcy Court for the:	Northern	District of Illin	ois		
C			(Sta	ate)		
Case number (If known)						
Official F	orm 108					amended filing
Stateme	nt of Intenti	on for Individu	uals Filin	g Under	Chapter 7	12/15
■ creditors have	e claims secured by yo	apter 7, you must fill out th our property, or and the lease has not expir			-	
		vithin 30 days after you file ktends the time for cause.`	•	• •		•
•	eople are filing togethe ust sign and date the	r in a joint case, both are e	equally responsi	ble for supplyin	g correct information.	
Be as complete	and accurate as possil	ole. If more space is neede	d, attach a separ	ate sheet to this	form. On the top of any	additional pages,

write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.							
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?					
	Creditor's name: Drive Time Description of property securing debt: // REAFFIRM Value: \$10,525.00	 Surrender the property. Retain the property and redeem it. ✓ Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: 	No. ✓ Yes.					
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.					
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.					
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.					

Debtor Shuk Gase 15-42300 Doc 1 Filed 12/15/15 Entered 12/15/15 20;56:25 Desc Main Middle Name Document Name age 56 of 72/15

any unexpired personal property lease that you listed in Schedule G: Execormation below. Do not list real estate leases. Unexpired leases are leases the expired personal property lease if the trustee does not assume it. 11 U.S.C.	nat are still in effect; the lease period has not yet ended. You may assume ar
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Patel, Jody	□ No ✓ Yes
Description of leased property: Debtor's residential lease	
Lessor's name:	□ No □ Yes
Description of leased property:	
Lessor's name:	□ No □ Yes
Description of leased property:	
Lessor's name:	□ No □ Yes
Description of leased property:	
Lessor's name:	No Yes
Description of leased property:	
Lessor's name:	□ No □ Yes
Description of leased property:	
Lessor's name:	□ No □ Yes
Description of leased property:	
3: Sign Below	

🗴 /s/ Shukura Tartt	×
Signature of Debtor 1	Signature of Debtor 1
Date 12/16/2015 MM/DD/YYYY	Date

Case 15-42300 Doc 1 Filed 12/15/15 Entered 12/15/15 20:56:25 Desc Main Page 57 of 72 Document

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Shukura Tartt		Case No.					
_	Debtor			(If known)				
			Chapter	Chapter 7				
1	DISCLOSURE OF Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. year before the filing of the petition in bankruptcy, in connection with the bankruptcy case is as follow	r agreed to be paid to me, for services rendered	ovenamed debtor(s) and the	at compensation paid to me within one				
	For legal services, I have agreed to accept	is.		\$1,465.00				
	Prior to the filing of this statement I have received			\$0.00				
	Balance Due			\$1,465.00				
2	. The source of the compensation paid to me was: Debtor	Other (specify)						
3	. The source of the compensation paid to me is: Debtor	Other (specify)						
4	I have not agreed to share the above-disclose members and associates of my law firm.	d compensation with any other person unless the	ey are					
	I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.							
5	. In return for the above-disclosed fee, I have agree a. Analysis of the debtor's financial situation	d to render legal service for all aspects of the bar, , and rendering advice to the debtor in determinir		n in bankruptcy;				
	b. Preparation and filing of any petition, sch	edules, statements of affairs and plan which may	be required;					
	c. Representation of the debtor at the meet	ng of creditors and confirmation hearing, and any	y adjourned hearings there	eof;				
6	. By agreement with the debtor(s), the above-disclo	sed fee does not include the following services:						
		CERTIFICATION						
	I certify that the foregoing is a complete statement or seedings.	any agreement or arrangement for payment to n	ne for representation of the	e debtor(s) in this bankruptcy				
	12/16/2015	/s/ Marcie	Venturini 6203500					
	Date	ture of Attorney						
			nrad Law Firm					
		Nan	ne of law firm					

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1465.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Shukura Tartt Matter Number 369920-001 Initial:

Case 15-42300 Doc 1 Filed 12/15/15 Entered 12/15/15 20:56:25 Desc Main Document Page 59 of 72

the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

ageni mereor.	
Date: 12/15/15	
Client	Client Hukura / cutt
Attorney Muleux _	

Shukura Tartt Matter Number 369920-001

Initial:		
n maa.		

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankrupt cy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7 : Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny

your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13 : Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/forms/hotice-individual-consumer-debtor.

Case 15-42300 Doc 1 Filed 12/15/15 Entered 12/15/15 20:56:25 Desc Main UNITED STATES BANKBURTCY COURT Northern District of Illinois

In re:	Tartt, Shukura	Case No						
_	Debtor(s)							
		Chapter. Chapter7						
	VERIFICATION OF CREDITOR MATRIX							
The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of the								
Date:	12/16/2015	/s/ Tartt, Shukura						
		Tartt Shukura						

Signature of Debtor

VALUE AUTO Case 15-42300 Doc 1 Filed 12/15/15 Entered 12/15/15 20:56:25 Desc Main 2734 N CICERO Document Page 63 of 72 CHICAGO, 60639

JVDB ASC PO Box 5718 Elgin, 60121

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA, 30301

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA, 30301

Barnes Auto 2125 N. Cicero Chicago, 60639

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO, 60601

CCI 501 Greene Street # 302 Augusta, 30901

CENTRAL FURN 1348 N MILWAUKEE CHICAGO, 60622

Drive Time 9850 Indianapolis Blvd Highland, 46322

CONSUMER PORTFOLIO SVC PO BOX 57071 IRVINE, 92619

City of Chicago - Parking and red Light Tickets Department of Revenue - PO Box 88292 Chicago, 60680

AT&T Mobility PO Box 6416 Carol Stream, 60197

AT&T Mobility II LLC One AT&T Way Room 3A104 Bedminster, 07921

Sprint P.O. Box 219554 Kansas City, 64121

T-Mobile P.O. Box 742596 Cincinnati, 45274

Dell Computers 2300 West Plano Parkway Plano, 75075

Case 15-42300 Doc 1 Filed 12/15/15 Entered 12/15/15 20:56:25 Desc Main Document Page 64 of 72

Aarons Furniture 4428 W North Ave Chicago, 60651

ComEd 3 Lincoln Center Bankruptcy Section Oakbrook Terrace, 60181

Check N Go - Kedzie 800 N Kedzie Ave #225 Chicago, 60651

SUN CASH 598 Torrence Ave Calumet City, 60409

William A Rodgers 2106 S Harding Ave Chicago, 60623

Tina Hall 1532 S St Louis Chicago, 60623

Protege Investment 8550 S HARLEM #G C/O Arman K Zanayed Oak Lawn, 60453

State of Illinois - Dept of Revenue PO Box 19043 Springfield, 62794

First Name	0-42300 DOC 1 FILED 1	Last Name – Last Name	9.56:25 Desc Main
Part 6: Answer These Q	Middle Name Luestions for Reporting Purpo	ມູກໍ່ີ່ Page 65 of 72	
16. What kind of debts do you have?	as "incurred by an indiv No. Go to line 16b. Yes. Go to line 17. 16.b Are your debts primar obtain money for a busi investment. No. Go to line 16c. Yes. Go to line 17.	rily consumer debts? Consumer debts ridual primarily for a personal, family, o rily business debts? Business debts a iness or investment or through the open you owe that are not consumer debts or	ar household purpose." are debts that you incurred to ration of the business or
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid the funds will be availab for distribution to unsecured creditors?	paid that funds will be ava ☑ No. at ☐ Yes. le	nter 7. Go to line 18. 7. Do you estimate that after any exempt property in the initial state of the initial stat	s excluded and administrative expenses are
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19. How much do you estimate your assets to be worth?	▼ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	□ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below			
For you	and correct. If I have chosen to file under or 13 of title 11, United States proceed under Chapter 7. If no attorney represents me a fill out this document, I have of I request relief in accordance. I understand making a false s.	and I did not pay or agree to pay some obtained and read the notice required be with the chapter of title 11, United Statestatement, concealing property, or obtaic case can result in fines up to \$250,000 41, 1519, and 3571.	eed, if eligible, under Chapter 7, 11,12, e under each chapter, and I choose to cone who is not an attorney to help me by 11 U.S.C. § 342(b). The end of Debtor 2 to the each chapter, and I choose to cone who is not an attorney to help me by 11 U.S.C. § 342(b). The end of Debtor 2 to the each chapter, and I choose to the end of Debtor 2 to the each chapter, and I choose to the end of Debtor 2 to the end of De
		D/YYYY	MM / DD / YYYY

Debtor 1 Shukura Case 15-42300 Doc 1 Filed 12/115/15 Entered 12/115/115 (20:56:25 Desc Mail First Name Middle Name Documents Page 66 of 72

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Marcie Venturini 6203500		Date	12/16/2015	
Signature of Attorney for Debtor		_	MM / DD / YYYY	
Marcie Venturini 6203500				
Printed name				
Semrad Law Firm				
Firm name				
Number	Street			
O	01-4-	***************************************	7's Code	
City	State		Zip Code	
Contact phone		Email address		

Case 15-42300 Doc 1 Filed 12/15/15 Entered 12/15/15 20:56:25 Desc Main Fill in this information to identify your case: Debtor 1 Shukura Tartt Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) (If known) Check if this is an Official Form 106Dec amended filing **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Attach Bankruptcy Petition Preparer's Notice, Declaration, and Yes. Name of person Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with his that they are true and correct. Shukura Tartt Signature of Debtor 2 Signature of Debtor 1

Date

MM/DD/YYYY

Date 12/16/2015

MM/DD/YYYY

Debtor	Shukura Case 15-42300 Doc 1 File	ed 12/15/15 Entered 12/15/15 20:56:25 Desc Main Page 68 of 72
		give a financial statement to anyone about your business? Include all financial institutions,
	No Yes. Fill in the details below.	
		Date issued
	Name	MM/DD/YYYY
	Number Street	_
	City State Zip Code	_
art 12	Sign Below	
and	correct. I understand that making a false statement, kruptcy case can result in fines up to \$250,000, or im	Affairs and any attachments, and I declare under penalty of perjury that the answers are true concealing property, or obtaining money or property by fraud in connection with a prisonment for up to 20 years, or both. 18 V.S.C. §§ 152, 1341, 1519, and 3571.
	Date 12/16/2015	Date
Did	Date 12/16/2015	Signature of Debtor 2
Did	Date 12/16/2015	Date
	Date 12/16/2015 you attach additional pages to Your Statement of Fin	Date nancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
	Date 12/16/2015 you attach additional pages to Your Statement of Fin No Yes	Date nancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
	Date 12/16/2015 you attach additional pages to Your Statement of Fin No Yes you pay or agree to pay someone who is not an attor	Date nancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Case 15-42300 Debtor Shukura	Doc 1 Filed 12/15/15	Entered 12/15/15 20:56:	25 Desc Main
	Middle Name Last Nan	ne known)	
Part 2: List Your Unexpired Perso			
For any unexpired personal property lea- information below. Do not list real estate unexpired personal property lease if the	leases. Unexpired leases are leases	that are still in effect; the lease period h	
Describe your unexpired personal pr	operty leases	Will th	e lease be assumed?
Lessor's name: Patel, Jody		☐ No ☑ Ye	
Description of leased property: Debtor's residential lease			
Lessor's name:		□ No	
Description of leased property:			
Lessor's name:		☐ No	
Description of leased property:		kun da kalanda ka kulumin sa ummora ya makaka kun andana dalahhirin kali khilikaka (1,70 k. 2,7 k. 2	
Lessor's name:		No No	
Description of leased property:			
Lessor's name:	угаа к такжа жөөтөө жак төгөү кайта тууу түзү түзү түй түйүү түй түү кайта такжа такжа жасата	No.	
Description of leased property:	aan ar sar sarka keeska a sar see ar sar saran sar	n vija kunsanin kang jaka khang pengangangan penganahan penganahan penganan kang penganan penganan penganan ka	
Lessor's name:		No.	
Description of leased property:			
Lessor's name:	- M - M - 1 - M -	No.	
Description of leased property:			
Part 3: Sign Below			
Under penalty of perjury, I declare that that is subject to an unexpired lease. /s/ Shukura Tartt Signature of Debtor 1	I have indicated my intention about	x Signature of Debtor 1	a debt and any personal property
Date <u>12/16/2015</u> MM/DD/YYYY		Date MM/DD/YYYY	

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Shukura Tartt		Case No.	
_	Debtor			(if known)
			Chapter	Chapter 7
1	DISCLOSURE Pursuant to 11 U.S.C. § 329(a) and Fed. Bar year before the filing of the petition in bankru in connection w ith the bankruptcy case is as	ptcy, or agreed to be paid to me, for services	for the abovenamed debtor(s) and th	at compensation paid to me within one
	For legal services, I have agreed to accept			\$1,465.00
	Prior to the filing of this statement I have rec	eived		\$0.00
	Balance Due			\$1,465.00
2	. The source of the compensation paid to me was Debtor	vas: Other (specify)		
3.	. The source of the compensation paid to me i	s: Other (specify)		
4.	I have not agreed to share the above-dimembers and associates of my law firm	sclosed compensation with any other person .	unless they are	
		sed compensation with a other person or per A copy of the agreement, together with a list o , is attached.		
5.	. In return for the above-disclosed fee, I have a. Analysis of the debtor's financial situ	agreed to render legal service for all aspects uation, and rendering advice to the debtor in		in bankruptcy;
	b. Preparation and filing of any petition	n, schedules, statements of affairs and plan w	which may be required;	
	c. Representation of the debtor at the	meeting of creditors and confirmation hearing	g, and any adjourned hearings there	of;
6.	. By agreement with the debtor(s), the above-	disclosed fee does not include the following s	ervices:	
:		CERTIFICATION		
	I certify that the foregoing is a complete statem eedings.	ent of any agreement or arrangement for pay	ment to me for representation of the	edebtor(s) in this bankruptcy
	12/16/2015	Is	s/ Marcie Venturini 6203500	
-	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

Case 15-42300 Doc 1 Filed 12/15/15 Entered 12/15/15 20:56:25 Desc Main UNITED STATES BANKS UPTICY! (7QURT Northern District of Illinois

in re:	Debtor(s)	Case No	Case No			
		Chapter.	Chapter7			
	VERIFICA	TION OF CREDITOR MAT	RIX			
	The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledg					
Date:	12/16/2015	/s/ Tartt, Shukura Tartt, Shukura Signature of Debtor	Deuleua Toutt			

Debtor 1 Shukura Case 15-42300 Doc 1	Filed 12/45/15	Entered	12/15/15/	Q:56:25 D	esc Main
First Name Middle Name	Document	Page 72 c			
			Column A Debtor 1	Column B Debtor 2 o non-filing	
8.Unemployment compensation		¢	0.00	non-ming	spouse
Do not enter the amount if you contend that the amount Social Security Act. Instead, list it here:	t received was a benefit under		0.00		
For you	\$0.00				
For your spouse					
 Pension or retirement income. Do not include any ar benefit under the Social Security Act. 	mount received that was a	\$ <u>c</u>	0.00		
10.Income from all other sources not listed above. Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total below.	Security Act or payments manity, or international or	nt.			
		-			
Total amounts from accounts account from		+9	\$0.00	+	Andread Control of the Control of th
Total amounts from separate pages, if any.			7		
11. Calculate your total current monthly income. Add	d lines 2 through 10 for each	\$3	3,602.67	+	= \$3,602.67
column. Then add the total for Column A to the total t					
					Total current
Data marine Miles die andre Marine Toda	A				monthly income
Part 2: Determine Whether the Means Test					· · · · · · · · · · · · · · · · · · ·
 Calculate your current monthly income for the year Copy your total current monthly income from line 1 			_		40,000,07
	1.		C	copy line 11 here →	\$3,602.67
Multiply by 12 (the number of months in a year).					X 12
12b. The result is your annual income for this part of the	e form.				12b. <u>\$43,232.04</u>
13 Calculate the median family income that applies to	vou Follow these stens:				
To outdutte the median family moone that applies to	Illinois				
Fill in the state in which you live.					
Fill in the number of people in your household.	1				
Fill in the median family income for your state and size of	of household.				13. \$49,682.00
To find a list of applicable median income amounts, go instructions for this form. This list may also be available			•		
14. How do the lines compare?					
14a. Line 12b is less than or equal to line 13. On the Go to Part 3.	e top of page 1, check box 1,	There is no pres	sumption of abuse) .	
14b. Line 12b is more than line 13. On the top of pa Go to Part 3 and fill out Form 122A-2.	ge 1, check box 2, The presu	imption of abuse	is determined by	Form 122A-2.	
Part 3: Sign Below					
·			•		
By signing here, I declare under penalty of perjury that	the information on this stater	ment and in any a	attachments is tru	e and correct.	
(X/s/Shukura Tartt) // WWW	a Rutt	x			
Signature of Debtor 1	<u> </u>	Signature of	Debtor 2		
		y			
Date 12/16/2015		Date	DD/YYYY		
MM/DD/YYYY		MM/L	ן זיז <i>ו</i> טע		
If you checked line 14a, do NOT fill out or file Form					